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							(Signature)
			<u>L_</u>				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	<u> </u>	ATTORNEY DOCKE	T NO.	CONFIRMATION NO.
10/580,014 07/11/2006 FITLE OF INVENTION: PACKAGING BAG			Naruhito Higo 28730U 7726 11/04/2009 FHOHAMM1 00000027 10580014				
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nonprovisional	NO	\$1510	\$300	\$0	\$181	0	12/28/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
DESAI, KAUSHIKKUMAR A		3728	206-438000	_			
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 THE NATH LAW GROUP 2 Susanne M. Hopkins 3 Mihsuhn Koh				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Tosu-shi, Saga, JAPAN HISAMITSU PHARMACEUTICAL CO., INC.							
a. The following fee(s) a	are submitted:	48	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0112 (enclose an extra copy of this form).				
a. Applicant claims	us (from status indicated s SMALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no long				
iterest as shown by the r	ecords of the United Stat	tes Patent and Trademark	d from anyone other than the Office.	ne applicant; a regis	tered attorney or age	nt; or the as	ssignee or other party in
Authorized Signature	Am	held		Date	November	3 , 200	9
Typed or printed name	Susar	nne M. Hopkins		Registration No	o. <u>33,24</u>	17	
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and abmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete							

T aı submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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